

SAMPLE APPLICATION

****TO BE FILED AFTER PASSING EXAM****

9. Since your admission to the State Bar of California:

- | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| a. Have you been disbarred, suspended or disciplined by the State Bar of California or similar attorney disciplinary authority or any other authority that imposes professional discipline in California, or in another state or jurisdiction, including a foreign jurisdiction? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. Do you have any discipline pending? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. Have you had any felony convictions? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. Did you resign from any bar, court or body before whom you appear? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. Have there been three or more judgments of professional negligence against you? <i>(If yes, please attach the relevant documents.)</i> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. Have any sanctions, other than discovery sanctions, been entered against you by any court or body before whom you appear? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| g. Have any findings of contempt been made against you by any court or body before whom you appear? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| h. Have you been denied certification or recertification as a legal specialist by the State Bar of California Board of Legal Specialization, or any other certifying body? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

IF YOU ANSWER YES TO ANY OF THE ABOVE, YOU MUST PROVIDE FULL DETAILS ON A SEPARATE SHEET. A record of discipline or failure to disclose any of the information requested above may constitute grounds for denial of your application.

DECLARATION

I hereby authorize all educational institutions, governmental agencies and instrumentalities (including bar associations and bar examiners of other jurisdictions), employers and business and professional associates (past and present), to release to the California Board of Legal Specialization and the Criminal Law Advisory Commission any nonprivileged information, files or records requested by them for the purpose of processing this application. The foregoing release does not apply to matters communicated by me in confidence to any lawyer, spouse, physician, psychotherapist or clergy person for which I have privilege of nondisclosure under the provisions of Chapter 4, Division 8 of the California Evidence Code.

I further authorize the Criminal Law Advisory Commission to conduct independent inquiry and review as provided in section 9.0 of the Rules.

I agree to pay all fees required by the California Board of Legal Specialization when due.

I agree to abide by all rules and regulations of the California Board of Legal Specialization as amended from time to time and to furnish to the Board and the Criminal Law Advisory Commission such information as they may require to determine my entitlement to certification.

I am the applicant herein for certification as a criminal law specialist under the State Bar of California Program for Certifying Legal Specialists. I fully understand that failure to make a truthful disclosure of any fact, item or information required may result in the denial of my application, revocation of my certificate of specialization, or disciplinary action by the State Bar of California. I have carefully read and answered each question completely and truthfully in the foregoing application and any attachments hereto, and certify that the information therein is true and correct to the best of my knowledge.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration is executed on:

Date: _____

Print Name: _____ Signature: _____

TASK AND EXPERIENCE REQUIREMENT**ATTACHMENT A**

Applicant Name: _____ Bar Number: _____

The Criminal Law Advisory Commission may require additional evidence of completion of tasks and experience as indicated in this Attachment A.

Applicants unable to provide complete information in items 1 through 4 below may be permitted to file a partially complete application, provided applicants furnish certification by supervising attorneys, former employers, or other appropriate persons as to satisfaction of the requirements. If the information provided is incomplete, attach the following to this Attachment A: (1) a statement explaining why it was impossible or overly burdensome to provide complete information, and (2) the certification described above.

If you are using the alternative tasks set forth in section 3.0 of the Standards to certify, complete Attachment A-1 instead.

For purposes of 1 through 4 below, *principal counsel* means an attorney who presents the case or proceeding to the court or jury during its entire course or a substantial part thereof. More than one attorney may be a principal counsel so long as each is involved in the presentation of a substantial part of the case or proceeding.

Within the five years immediately preceding submission of this application, I have been principal counsel of record in criminal proceedings as follows: *Provide requested information for each case listed. Use common abbreviations in listing case titles, courts, etc.*

- ☐ 1. Five jury trials in California, or in any U.S. District Court, in cases submitted to the jury for decision wherein the offenses charged were felonies.

| | TITLE OF CASE | COURT & CASE NO. | NATURE OF CASE & CHARGES | DATE CASE SUBMITTED TO JURY OR DATE VERDICT RENDERED |
|---|---------------|------------------------|--------------------------------|------------------------------------------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

AND**(CONTINUED ON NEXT PAGE)**

- ☐ 2. Five additional jury trials in any jurisdiction in cases submitted to the jury for decision, regardless of the nature of the offenses.

| | TITLE OF CASE | COURT & CASE NO. | NATURE OF CASE & CHARGES | DATE CASE SUBMITTED TO JURY OR DATE VERDICT RENDERED |
|---|---------------|------------------------|--------------------------------|------------------------------------------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

AND

- ☐ 3. Forty additional criminal matters, which may include juvenile court proceedings relating to allegations of criminal misconduct, to disposition in a Municipal or Superior Court within the State of California or a U.S. District Court or Federal Magistrate Court. Information should be furnished as completely as possible based on the applicant's office records; recourse to court records is not required. *Disposition* means pronouncement of judgment, including conviction, acquittal and dismissal in a criminal case or a final order on the merits in a criminal matter or proceeding. **APPLICANTS LISTING LESS THAN THE 40 MATTERS REQUIRED OR OMITTING MATTER NUMBERS MUST REFER TO THE INFORMATION AT THE BEGINNING OF ATTACHMENT A.**

List the 40 criminal matters on a separate sheet, using the format indicated below, and attach it to this Attachment A.

| | TITLE OF CASE | COURT & CASE NO. | DATE & NATURE OF MATTER (e.g., plea, trial, 1538.5 motion, etc.) | NATURE OF DISPOSITION (judgment, order revoking probation, information set aside, etc.) |
|---|---------------|------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

AND

(CONTINUED ON NEXT PAGE)

☐ 4. **ANY TWO** of 4.1, 4.2 and 4.3:

- ☐ 4.1 Five (5) hearings, pursuant to section 1538.5 of the Penal code or any other motion to suppress evidence, in which oral testimony was taken and in which decisions have been rendered (hearings in Municipal Courts may be listed), **AND** three (3) petitions or answers filed in extraordinary writ proceedings in the following courts: U.S. Supreme Court, U.S. Court of Appeals, U.S. District Court, California Supreme Court, California Court of Appeal, California Superior Court.

| HEARINGS | | | | |
|--------------------------------------------------------------|---------------|----------|-------------------|------------------------|
| | TITLE OF CASE | CASE NO. | COURT WHERE TRIED | DATE DECISION RENDERED |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| PETITIONS OR ANSWERS FILED IN EXTRAORDINARY WRIT PROCEEDINGS | | | | |
| | TITLE OF CASE | CASE NO. | COURT WHERE HEARD | NATURE OF PROCEEDING |
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

OR

(CONTINUED ON NEXT PAGE)

- ☐ 4.2 Three appeals in the following courts in which briefs were filed by the applicant: U.S. Supreme Court, U.S. Court of Appeals, U.S. District Court, California Supreme Court, California Court of Appeal, California Superior Court.

| | TITLE OF CASE | CASE NO. | COURT WHERE HEARD | WERE BRIEFS FILED BY BOTH SIDES? (YES OR NO) |
|---|---------------|----------|-------------------|-------------------------------------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

OR

- ☐ 4.3 Five jury trials submitted to the jury for decision, regardless of the nature of the offense, in addition to those listed in sections 1 and 2 above.

| | TITLE OF CASE | CASE NO. | COURT WHERE TRIED | DATE CASE SUBMITTED TO JURY OR DATE VERDICT RENDERED |
|---|---------------|----------|-------------------|------------------------------------------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

**TASK AND EXPERIENCE REQUIREMENT
ATTACHMENT A-1**

Alternative to Criminal Task Requirements

Applicant Name: _____ Bar Number: _____

The Criminal Law Advisory Commission may require additional evidence of completion of tasks and experience as indicated in this Attachment A-1.

As an alternative to the criminal trial practice task requirements listed in section 2.0 of the Standards, I qualify by showing the following law practice requiring similar skills, as described in section 3.0 of the Standards:

CHECK THE BOXES THAT APPLY AND COMPLETE THE APPROPRIATE SECTIONS BELOW. ATTACH ADDITIONAL SHEETS AS NEEDED. Refer to SECTION 3.0 of the Standards for additional information regarding alternatives to criminal trial practice task requirements.

☐ 1. I have had substantial involvement in other areas of law practice requiring skills similar to criminal trial practice, such as:

☐ a. Litigation in contested civil matters involving jury trials

| NAME OF CASE | CASE NO. | COURT WHERE TRIED | TYPE OF CASE | DECISION DATE |
|--------------|----------|-------------------|--------------|---------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

☐ b. Appellate practice in either criminal or non-criminal matters in proceedings in which decisions after hearing have been reached

| TITLE OF CASE | CASE NO. | COURT WHERE HEARD | NATURE OF PROCEEDING |
|---------------|----------|-------------------|----------------------|
| | | | |
| | | | |
| | | | |
| | | | |

EDUCATION REQUIREMENT

ATTACHMENT B

Applicant Name: _____ Bar Number: _____

In order to satisfy the education requirement for certification, you must have completed at least 45 hours of approved education as specified in section 4.0 of the Standards ***within the three years immediately preceding submission of this application.*** One-half, or 22.5 hours, may be satisfied with alternative educational activities as described in section 6.2 of the Rules.

ON ATTACHMENT B-1, list the educational activities you have attended or taught (excluding alternative educational activities) that were specifically approved for legal specialist credit. Refer to Attachment B-1 for the type of documentation required.

REMEMBER: Courses taken to fulfill the MCLE special topic requirements (legal ethics, substance abuse/mental distress, elimination of bias in the legal profession) CANNOT be used to satisfy the education requirement for certification, although a course in legal ethics that relates specifically to your specialty area may qualify.

ON ATTACHMENT B-2, list the educational activities you have attended or taught (excluding alternative educational activities) that were not specifically approved for legal specialist credit. Refer to Attachment B-2 for a further explanation and the type of documentation required.

ON ATTACHMENT B-3, list any alternative educational activities (section 6.2 of the Rules) that you have completed to satisfy the education requirement. Keep in mind that, with the exception of approved tapes, hours claimed for alternative educational activities are subject to approval by the Advisory Commission.

Summarize your hours in the grid provided below.

SUMMARY OF EDUCATION ACTIVITIES (INCLUDING ALTERNATIVES)

(Section numbers refer to specific education requirements set forth in Standards)

| AREA | HOURS ATTENDED OR TAUGHT (total from B-1 + B-2) | HOURS OF ALTERNATIVE EDUCATION (total from B-3) | TOTAL |
|-------------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------|-------|
| Section 4.1 Evidence | | | |
| Section 4.2 Trial Advocacy | | | |
| Section 4.3 Substantive Criminal Law and Procedure | | | |
| Section 4.4 Writs, Appeals and Ancillary Proceedings | | | |
| Section 4.5 Other Subjects related to Criminal Law | | | |
| TOTAL (minimum of 45 hours) | | | |

EDUCATION REQUIREMENT**ATTACHMENT B-1**

Applicant Name: _____ Bar Number: _____

On this attachment, list the educational activities you have attended or taught (excluding alternative educational activities as described in section 6.2 of the Rules) that were specifically approved for legal specialist credit. Providers of approved legal specialist activities are subject to the same requirements as MCLE providers, so you should have been provided with a **certificate of attendance** indicating that the activity was approved for legal specialist credit and stating the number of hours of credit you received.

COPY THIS ATTACHMENT IF ADDITIONAL SPACE IS NEEDED.

DOCUMENTATION REQUIRED FOR EACH ACTIVITY: certificate of attendance. The provider is required to give you a certificate of attendance. If you did not receive a certificate, contact the provider.

| NAME OF PROGRAM SPONSOR OR APPROVED PROVIDER | NAME OF PROGRAM | HOURS ATTENDED | HOURS TAUGHT | DATE COMPLETED |
|-------------------------------------------------|-----------------|-------------------|-----------------------------------------------------------------------------------------------------|-------------------|
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |

*Calculate credit for teaching as follows: Next to **HOURS**, put the actual number of hours of speaking time. Check the appropriate box to indicate whether it was your first time presenting the activity or a repeat presentation. If it was the first time, multiply the actual speaking time by 4 and put the result next to **TOTAL**. If it was a repeat presentation, you may claim only actual speaking time. In that case, **HOURS** and **TOTAL** will be the same number.

EDUCATION REQUIREMENT**ATTACHMENT B-2**

Applicant Name: _____ Bar Number: _____

On this attachment, list the educational activities you have attended or taught (excluding alternative educational activities as described in section 6.2 of the Rules) that were **NOT** specifically approved for legal specialist credit but that you believe meet the criteria for approval of educational activities set forth in section 7.3 of the Rules.

COPY THIS ATTACHMENT IF ADDITIONAL SPACE IS NEEDED.

DOCUMENTATION REQUIRED FOR EACH ACTIVITY: Sufficient information for the Advisory Commission to determine whether credit should be granted (for example, promotional materials, a brief description of the program, course outline, list of instructors).

| NAME OF PROGRAM SPONSOR | NAME OF PROGRAM | HOURS ATTENDED | HOURS TAUGHT | DATE COMPLETED |
|-------------------------|-----------------|-------------------|-----------------------------------------------------------------------------------------------------|-------------------|
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |
| | | | _____ HOURS <input type="checkbox"/> 1ST TIME <input type="checkbox"/> REPEAT _____ TOTAL* | |

*Calculate credit for teaching as follows: Next to **HOURS**, put the actual number of hours of speaking time. Check the appropriate box to indicate whether it was your first time presenting the activity or a repeat presentation. If it was the first time, multiply the actual speaking time by 4 and put the result next to **TOTAL**. If it was a repeat presentation, you may claim only actual speaking time. In that case, **HOURS** and **TOTAL** will be the same number.

EDUCATION REQUIREMENT**ATTACHMENT B-3**

Applicant Name: _____ Bar Number: _____

On this attachment, list the alternative methods you used to satisfy the education requirement. Remember that no more than one-half (1/2) of your requirement can be satisfied in this manner. **SEE SECTION 6.2 OF THE RULES FOR LIMITATIONS ON ALTERNATIVE METHODS TO SATISFY THE EDUCATIONAL REQUIREMENT.**

If you are submitting activities that require Advisory Commission approval, we recommend that you **SUBMIT YOUR APPLICATION NO LATER THAN FOUR MONTHS PRIOR TO THE DEADLINE.**

The Advisory Commission may require additional information regarding alternative education activities.

| ALTERNATIVE EDUCATION | # HOURS REQUESTED |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| 1. Self-verified listening to and/or viewing of a complete audio or audio/visual reproduction of an approved program or program segment. Such tapes must be approved for educational credit and listened to or viewed within the time period for which they were approved. <u>YOU MUST ATTACH A LIST OF YOUR SELF-STUDY ACTIVITIES.</u> | |
| 2. Self-verified participation in other approved audiovisual activities, including interactive video instruction and activities electronically transmitted from another location, such as online education. <u>YOU MUST ATTACH A LIST OF YOUR SELF-STUDY ACTIVITIES.</u> | |
| 3. Writing or editing published articles or books relating to criminal law. PLEASE SUBMIT A COPY OF THE MATERIALS FOR WHICH YOU ARE CLAIMING CREDIT. The hours of credit to be allowed shall be determined by the Commission after consideration of the amount and quality of the submitted materials. | |
| 4. Teaching a course in the field of criminal law at an accredited institution of higher education. The hours of credit to be allowed shall be determined by the Commission based upon the amount and quality of professional education involved. NAME OF INSTITUTION: NAME OF COURSE: BRIEF DESCRIPTION: TO WHOM THE COURSE WAS TAUGHT: DATE COMPLETED: | |
| 5. Completion of an advanced postgraduate course at an accredited law school that includes education in criminal law. The hours of credit to be allowed shall be determined by the Commission based upon the amount and quality of professional education involved. NAME OF LAW SCHOOL: COURSE COMPLETED: DATE COMPLETED: | |

INDEPENDENT INQUIRY AND REVIEW**ATTACHMENT C**

Applicant Name: _____ Bar Number: _____

I submit the names and addresses of the following **eight** individuals to act as references who can attest to my proficiency in the practice of criminal law: **four** lawyers who practice in the same geographical area as I do, **one** judge of a Justice, Municipal or Superior Court within the State of California, or a United States District Court or Federal Magistrate Court, before whom I have appeared as an advocate within the two years immediately preceding application; and **three** California lawyers with whom I have tried a criminal case but with whom I am not associated.

In addition, I have submitted the names and addresses required Under sections 5.1.2 through 5.1.5 of the Standards. **The references do not include any attorney who is my relative or who currently is my client, partner, associate, employer or employee.**

All references, communications, reference forms, and information gathered pertaining to the applicant shall be the property of the State Bar and are confidential and no information concerning them and the matter to which they relate shall be given to any person except upon prior order of the Board of Governors of the State Bar or as provided in the Rules and Regulations.

Include each reference's California bar membership number to insure that reference forms are sent promptly and to the right individual. Bar membership numbers can be found online at www.calbar.ca.gov under Attorney Search.

| NAME AND BAR NUMBER | ADDRESS |
|---------------------------------------------------------|---------|
| 1. (lawyer practicing in same geographical area) | |
| 2. (lawyer practicing in same geographical area) | |
| 3. (lawyer practicing in same geographical area) | |
| 4. (lawyer practicing in same geographical area) | |

| NAME AND BAR NUMBER | ADDRESS |
|-----------------------------------------------------|---------|
| 5. (judge) | |
| 6. (CA lawyer with whom I have tried a case) | |
| 7. (CA lawyer with whom I have tried a case) | |
| 8. (CA lawyer with whom I have tried a case) | |

ATTACHMENT C (continued)

In addition to the above references, I submit:

The names and mailing addresses of the opposing counsel, judges and any co-counsel in the **last two** jury trials I conducted, if any:

| NAME AND BAR NUMBER | ADDRESS |
|---------------------|---------|
| 1.a. | |
| b. | |
| c. | |
| d. | |
| 2.a. | |
| b. | |
| c. | |
| d. | |

ATTACHMENT C (continued)

The names and mailing addresses of the opposing counsel, judges and any co-counsel in the **last two** preliminary hearings I conducted, if any:

| NAME AND BAR NUMBER | ADDRESS |
|---------------------|---------|
| 1.a. | |
| b. | |
| c. | |
| d. | |
| 2.a. | |
| b. | |
| c. | |
| d. | |

ATTACHMENT C (continued)

The names and mailing addresses of the opposing counsel, judges and any co-counsel in the **last two** writ or appellate matters I conducted, if any:

| NAME AND BAR NUMBER | ADDRESS |
|---------------------|---------|
| 1.a. | |
| b. | |
| c. | |
| d. | |
| 2.a. | |
| b. | |
| c. | |
| d. | |

ATTACHMENT C (continued)

The names and mailing addresses of the opposing counsel, hearing officer or referee, and any co-counsel in the **last two** administrative hearings I conducted, if any:

| NAME AND BAR NUMBER | ADDRESS |
|---------------------|---------|
| 1.a. | |
| b. | |
| c. | |
| d. | |
| 2.a. | |
| b. | |
| c. | |
| d. | |